

## MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

## **ORIGINAL OR AMENDED**

## STATEMENT OF ORGANIZATION FORM FOR CANDIDATE COMMITTEES

	ORW FOR CANDIDATE COMMITTEES
1. Committee ID #: 150 417  2. Type of Filing: Original Amendment to Items:  3. Full Name of Committee (must include Candidate's first and last name):  Committee To elect	10. REPORTING WAIVER REQUEST: If the committee does not expect to receive or expend in excess of \$1,000 in an election and checks this box, the filing requirement of pre, post and annual campaign statements is waived. The Reporting Waiver will be automatically lost if the committee exceeds the \$1,000 threshold.  11. Name and Address of Depositories or Intended Depositories of committee funds. (Michigan Bank, Credit Union or Savings & Los Association)  a. Official Depository
4a. Candidate Full Name (Last, First, M.I.):	- 1:+ 1/n/on
Neil Francek G	COPOCO CIECICI
4b. Political Party (if applicable):	a. Official Depository  Copoco credit Union  Wilder Rd. Bay City MI  wilder Rd. Bay City 4870.
Democrat	
4c. County of Residence: Buy Country	Y com
4d. Office Sought (Check one):	b. Secondary Depository
Governor Lt. Governor State Senator	ا الله الله الله الله الله الله الله ال
	N Figo
State Rep. Sec. of State Attorney Gen.	
State Bd. of Ed. UofM Reg. MSU Trustee	12This item applies only to Gubernatorial Candidate
WSU Gov. Supreme Court Appeals Court	Committees: Check if this committee intends to seek qualifying
Circuit Court District Court Probate Court	contributions or make qualifying expenditures.
Municipal Court	
Local or other please specify: Bungor Tup Trustee	13. ELECTRONIC FILING: This item applies to committees that file
Local of other please specify. 10 30 70 5	with the Michigan Department of State Bureau of Elections only and
4e. District/Circuit # or Jurisdiction:	does not apply to candidates that file with the County Clerk's office.
5. Date Committee was Formed: <u>5/5/08</u>	The Campaign Finance Act requires any committee that files
1	with the Secretary of State and spends or receives \$20,000 in the
6a. Committee Phone #: 989 <u>684-666</u> 0	preceding calendar year OR expects to receive or spend \$20,000
6b. Committee Fax #:	in the current calendar year to file campaign statements electronically. Merts Plus software is provided to you free or charge to assist you in meeting this requirement.
6c. Committee E-mail Address:>	
7a. Complete Comm. Mailing Address (May be PO Box);	Committee spent or received or expects to spend or receive in excess of \$20,000 and is required to file electronically.
	** OR **
4107 Alexandria Blud	Committee did not arend as seeding as done not avance to aren
Buy City M; 48706	Committee did not spend or receive or does not expect to spend or receive in excess of \$20,000 and would like to file electronically voluntarily.
7b. Complete Comm. Street Address (May not be PO Box):	-
4107 Alexandria Blud	14. Verification: I/We certify that all reasonable diligence was used in the proposition of the above statement and that the contents of
4/0/11/2001	in the preparation of the above statement and that the contents and true, accurate and complete to the best of my/our knowledge o
Buy City Mi 48706	belief. If filing electronically, we further agree that the signatures below shall serve as the signatures that verify the accuracy and
8. Treasurer Name and Complete Address:	completeness of each statement filed electronically by the committee
Meil Francek	I/We certify that all reasonable diligence will be used in the
MELLI LONCER	preparation of each statement electronically filed by this committee
4107 Alexandria Blad	and that the contents of each statement will be true, accurate and
1 . 1 1 118711	complete to the best of my/our knowledge or belief. (Sign Name
Buy City Mi 4870L	and Date) Neil Froncek
Phone #: 989 <u>684 - 6660</u>	Candidate:
E-mail Address:	Candidate: 5/9/08
9. Designated Record Keeper Name and Complete Address:	Current Treasurer: /Veil Francek
	Mil Level 5/4/08
	Designated Depart Koon or (Desided tests (1997)
Phone #:	Designated Record Keeper (Required only if filing electronically):
E-mail Address:	·